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## SCHEDULE A (FEC Form 3)

PAGE 3548 OF FOR LINE NUMBER: (check only one)

ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X   11a
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NAME OF COMMITTEE (In Full) Friends of Sherrod Brown		
B	Zip Code 80127-3557  ion on Requested Cycle-to-Date	Date of Receipt    M
Full Name (Last, First, Middle Initial)  Arlene B. Morelli  Mailing Address 350 E 79th St  Apt 27A  City  New York  FEC ID number of contributing federal political committee.  Name of Employer  Morelli Ratner PC  Receipt For: 2012  Primary  Other (specify)  General		Date of Receipt    M M
Full Name (Last, First, Middle Initial)  Benedict P. Morelli  Mailing Address 950 3rd Ave  City  New York  FEC ID number of contributing federal political committee.  Name of Employer  Morelli Ratner PC  Full Name (Last, First, Middle Initial)  State  NY  State  NY  City  State  NY  FEC ID number of contributing federal political committee.  Attorney		Date of Receipt    M   M   2012     Transaction ID : C4400004  Amount of Each Receipt this Period   2500.00
SUBTOTAL of Receipts This Page (optional)		5600.00
TOTAL This Period (last page this line number only)		